

# UTILITY PATENT APPLICATION TRANSMITTAL

Address to: <b>Box PATENT APPLICATION</b> Commissioner of Patents P.O. Box 1450 Alexandria, VA 22313-1450	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Attorney Docket No.</td> <td>LIAO3073/EM</td> </tr> <tr> <td>First Named Inventor (or identifier)</td> <td>Gordon LIAO</td> </tr> <tr> <td>Total Pages</td> <td>37</td> </tr> </table>	Attorney Docket No.	LIAO3073/EM	First Named Inventor (or identifier)	Gordon LIAO	Total Pages	37
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Transmitted herewith is a patent application under 37 CFR 1.53(b).

Entitled: **Third Wheel Collapsing Device For Golf Club Cart**

- ☒ 1. Submitted herewith are the following:
- 17 pages of specification, including claims and Abstract.
  - 13 sheets of FORMAL drawings (Figs. 1-13).
  - 3 claims.
  - 1 Oath/Declaration signed by each inventor.
  - 1 Application Data Sheet.
  - 1 Assignment of the invention to Unique Product & Design Co., Ltd.,  
Tainan Hsien, Taiwan,
  - Cover Sheet, and payment of the \$40 recordal fee.
  - 1 check in the amount of \$425 (\$385- Filing Fee; \$40- Assignment Recordation Fee).
- ☒ 2. SMALL ENTITY STATUS IS ASSERTED pursuant to 37 CFR 1.27 for this application.
- ☒ 3. The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17, to Deposit Account No. 02-0200.
- ☐ 4. Insert before the first sentence of the specification: - - This application claims the benefit of provisional application number \_\_\_\_\_ filed \_\_\_\_\_. - -
- ☐ 5. Insert before the first sentence of the specification: - - This application is a Continuation-in-part of nonprovisional application number \_\_\_\_\_ filed \_\_\_\_\_. - -
- ☐ 6. Other: \_\_\_\_\_

The registered practitioners representing applicant(s) are J. Ernest Kenney, Reg. No. 19,179; Eugene Mar, Reg. No. 25,893; Richard E. Fichter, Reg. No. 26,382; Thomas J. Moore, Reg. No. 28,974; Joseph DeBenedictis, Reg. No. 28,502; and Benjamin E. Urcia, Reg. No. 33,805.

THE FILING FEE IS CALCULATED AS FOLLOWS:				Basic Fee:	\$770.00
Total Claims:	3	- 20 =	0	X \$18 =	\$0.00
Independent Claims:	1	- 3 =	0	X \$86 =	\$0.00
Correspondence Address: <b>BACON &amp; THOMAS, PLLC</b> 625 Slaters Lane, 4 <sup>th</sup> Floor Alexandria, VA 22314-1176  <div style="text-align: center; font-size: 1.2em;">23364</div> <div style="text-align: center; font-size: 0.8em;">CUSTOMER NUMBER</div>				Multiple Dependent Claim (add \$290.00):	\$0.00
				Subtotal:	\$770.00
				50% Reduction if Small Entity Status:	\$385.00
Phone: 703-683-0500      Fax: 703-683-1080				Total:	\$385.00
Date:	Name:		Signature:		Reg. No.
December 3, 2003	Eugene Mar				25,893